

MV2117 5/2004
s.409.105(H) Wis. Stats.

Amount Received, Document Number	
Check	Cash

Wisconsin Department of Transportation
P.O. Box 7949, Madison, WI 53707-7949

A Instructions: The Secured Party name and address listed on this form must match DMV records.

Complete section "C" on reverse side when vehicle has been repossessed outside Wisconsin.

REPOSSESSOR STATEMENT
pursuant to s.421.201(5) Wis. Stats.

B Repossessor (If different from that shown in section "A")

Name - Print	
Residence - County	State

C Repossession (If vehicle repossessed outside Wisconsin)

Repossessed in State of	Per Laws of State of
Vehicle Location	Number of Days at Location Indicated

I certify that:

- 1. As reposessor I was employed by the identified secured party in section "A";
- 2. The person identified as "Repossessed From", section "A", who is incorporated by reference, was a resident of Wisconsin at the time of execution of the security agreement and removed the above identified vehicle from Wisconsin for a period in excess of 15 days;
- 3. The information on this statement is true and correct to the best of my knowledge;
- 4. This statement is in support of a request for retitling the vehicle identified on reverse side.

X _____
(Reposessor/Authorized Agent Signature)